

REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/671,154
	Filing Date	09/25/2003
	First Named Inventor	Amarnath R. Arsikere
	Art Unit	2144
	Examiner Name	Mohamed Ibrahim
	Attorney Docket Number	1974-073251

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

28289

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

28289

OR

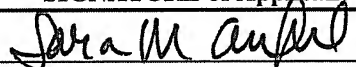
<input type="checkbox"/> Firm or Individual Name	The Webb Law Firm		
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I am the:

☐ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature			
Name	Sara M. Antol		
Date	3/25/08	Telephone	412-820-1495

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

☒ *Total of 1 forms are submitted.

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